PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/580650

CLAIMS AS FILED - PART I												
		· · · · · · · · · · · · · · · · · · ·	(Colun	nn 1)	(Column 2)			SMALL EN TYPE	TITY	OF	OTHER THAI SMALL ENTIT	
U.S. NATIONAL STAGE FEES] [RATE	FEE	7	RATE	FEE
BASIC FEE			SMALL ENT	Г. = \$ 150	LAR	RGE ENT. = \$ 300	1 1	BASIC FEE	150	OR	BASIC FEE	
EXAMINATION FEE			Satisfies PCT A			other situations = \$ 100 / \$ 200		EXAM. FEE	100	-	EXAM. FEE	-
SEARCH FEE				ions (ie. No Rpt.)	U.S. is ALL	ISA = \$50 / \$ 100 other countries = \$ 200 / \$ 400		SEARCH FEE	200	1	SEARCH FEE	-
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =		X \$ 125 =	000	1	X \$ 250 =	+
TOTAL CHARGEABLE CLAIMS			SH mi	nus 20 =	*			X \$ 25 =	 	OR	X \$ 50 =	
INDEPENDENT CLAIMS			/ n	ninus 3 =	*		ŀ	X \$ 100 =	 	OR	 	
MU	LTIPLE DEPEN	DENT CLAIM PR	ESENT			$\neg \neg \vdash$	ŀ	+ \$ 180 =	ļ	OR	X \$ 200 =	
* If	the difference	e in column 1 is	less than zero	o, enter "O	" in co	olumn 2	L	TOTAL	450	OR	+ \$ 360 =	-
		CLAIMS AS	AMENDED	DADI					7	4		L
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
							T	OTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF	
		(Column 1)		(Colum	ın 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	Γ	X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***	i	=	7	X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	ENTATION OF M	ULTIPLE DEPE	NDENT C	LAIM			+ \$ 180 =		OR	+ \$ 360 =	
								TAL ADDIT:		OR L	TOTAL ADDIT.	
***	If the "Highest Nu If the "Highest Nu	mn 1 is less than the mber Previously Paic mber Previously Paid nber Previously Paid	d For" IN THIS SP. d For" IN THIS SP.	ACE is less t	than '20' than '3'	", enter "20".	the a	ppropriate box i	n column 1.		•	